U.S. Department of Justice
United States Marshals Service

Document 587 Filed 09/09/14 Page 1 of 1
PROCESS RECUPT AND RETURN
United States Marshals Service

PLAINTIFF United States of America FILED FILED	COURT CASE NUMBER CR 12-10226-DJC
DEFENDANT DEFENDANT	TYPE OF PROCESS
John Kosta, et al.	Preliminary Order of Forfeiture
NAME OF INDIVIDUAL COMPANY CORPORATION FTC T	O SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SEDVE Roand of Assessors	C C C C C C C C C C C C C C C C C C C
AT ADDRESS (Street or RFD, Apartment & continuent & Code	
Orange Town Hall, 6 Prospect Street, Orange, Massacl	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS	Number of process to be served with this Form 285
Doreen M. Rachal, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse	Number of parties to be served in this case
1 Courthouse Way, Suite 9200 Boston, MA 02210	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN All Telephone Numbers, and Estimated Times Available for Service):	
14	Fold
Please serve the attached Preliminary Order of Forfeiture upon the all requested, or by regular first class mail if returned unexecuted. CATS ID 12-FBI-006389 JI	LJ x 3297
Simple SAME AND CONTRACTOR OF THE SAME OF	
	AINTIFF TELEPHONE NUMBER DATE 05 (617) 748-3100 8/4/14
SPACE BELOW FOR USE OF U.S. MARSHAL ON	LY DO NOT WRITE BELOW THIS LINE
l acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more apan one USM 285 is submitted) Total Process District of Origin No. 2 N	Signature of Authorized USMS Deputy or Clerk Date 8/8/1
I hereby certify and return that I have personally served, have legal evidence of on the individual, company, corporation, etc., at the address shown above on the on the	
☐ I hereby certify and return that I am unable to locate the individual, company, corp	oration, etc. named above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time am
	Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges including endeavors) Total Charges A	Advance Deposits Amount owed to U.S. Marshal* or (Amount of Refund*)
	60.00
REMARKS: 8/12/14 70/1 0/10	500 1 3668 7176

PRINT 5 COPIES:

1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED